



The County of Orange | **Employee Benefits**

2006 New Retiree Medical Insurance Program

**Human Resources
Employee Benefits Division**

▶
▶
▶
▶
▶
p
a
t
h
w
a
y
s





Today's Agenda

- ▶ Who is eligible for RMIP
- ▶ Health plan choices
- ▶ Enrollment process
- ▶ Examples of 2006 net health plan premiums
- ▶ Retirees and Medicare
- ▶ Resources for help and more information
- ▶ Questions and answers

p
a
t
h
w
a
y
s



Who Is Eligible for RMIP?

- ▶ Current County of Orange employees who
 - ▷ Are covered by the County Health Plan
 - ▷ Are at least age 50, with 10 years of **eligible** County **service hours** on the day employment ends
 - ▷ Have no breaks in County service since **August 1, 1993**
 - ▷ Will receive a monthly retirement check from OCERS during retirement
- ▶ **Not a guaranteed lifetime benefit**

▶
▶
▶
▶
▶
s
y
a
w
h
t
a
p



Buyback Provisions

- ▶ Differ from OCERS
 - ▷ Maximum one-year buyback for extra help to qualify for the 10-year minimum service requirement
 - ▷ Grant based on actual eligible service hours (at least 9 years)
 - ▷ Buyback for service after August 1, 1993 not applied to eligibility for grant

p
a
t
h
w
a
y
s



Health Plan Choices

- ▶ Types of coverage
- ▶ Things to consider
- ▶ Effective dates

p
a
t
h
w
a
y
s



Health Plan Choices

- ▶ Types of coverage
 - ▷ Usually identical to employee health plans
 - ▷ Service area/residence
 - HMO: Defined by zip code **within the state of California**
 - PPO: No service area limitations



Health Plan Choices

- ▶ Things to consider
 - ▷ Coverage — how much you pay out of pocket
 - ▷ Premiums — how much you pay each month
 - ▷ Choice of providers
 - HMO vs. PPO
 - Access to HMO or PPO providers while traveling
 - ▷ Deferred retirement — pre-existing condition exclusions apply to PPOs



Health Plan Effective Dates

- ▶ Active employee coverage ends on the last day of the month in which you separate from the County
- ▶ Retiree coverage starts on the first day of the month following your separation date
- ▶ Example
 - ▷ Last day of work: June 15
 - ▷ Active coverage ends June 30
 - ▷ Retiree coverage starts July 1

p
a
t
h
w
a
y
s



Enrollment Process

- ▶ Enrollment steps
- ▶ Health plan ID cards
- ▶ How to enroll

p
a
t
h
w
a
y
s



Enrollment Process

▶ **Step 1: Meet with OCERS** at least 60 days before your last day at work

▶ OCERS notifies the Benefits Center of your retirement at the end of the month

▶ The Benefits Center

- Calculates the amount of your grant (if applicable)
- Sends you a retiree enrollment packet
 - Personalized Benefits Enrollment Summary
 - Benefits Enrollment Guide
 - Any applicable forms



Enrollment Process

▶ **Step 1**(continued):

▷ If you wait too long...

- The Benefit Center may not receive your retirement information in time to send you an enrollment packet before you terminate employment with the County
- If you need medical care before your retiree coverage takes effect, you may have to elect and pay for COBRA coverage

▶
▶
▶
▶
▶
s
y
a
w
h
t
a
p



Enrollment Process

- ▶ **Step 2: Elect your retiree health plan coverage**
within 30 days from the date on your Benefits Enrollment Summary
- ▶ To enroll
 - ▷ Use the Benefits Center Web Site, or
 - ▷ Call the Benefits Resources Line
- ▶ If you make no new elections, you receive automatic coverage



Enrollment Process

- ▶ **Step 3: Review your *two* confirmation statements and report any errors within 10 business days**
 - ▷ First statement follows enrollment
 - Coverage changes are *pending*
 - ▷ Second statement follows separation/retirement date
 - Coverage changes are *activated*
 - Grant amount may differ if service differs



Enrollment Process

▶ Step 4: Pay your share of the premiums

- ▷ Initially you are billed for your retiree health plan premium (if applicable)
- ▷ You can have your premium deducted from your monthly retirement check
- ▷ If you terminate your retiree health plan coverage, you cannot re-enroll — **ever**



Health Plan ID Cards

- ▶ If you switch to a different health plan
 - ▷ New health plan ID cards are mailed within 30 days of second confirmation statement
 - ▷ If you do not receive your ID cards, contact the health plan
 - ▷ If you need to use your medical or prescription drug benefits before your ID card arrives, call the Benefit Resource Line to have your coverage verified with your provider or pharmacy

▶
▶
▶
▶
▶
s
y
a
w
h
t
a
p



Enrollment Process

- ▶ Start early for a smooth transition
- ▶ 30-day enrollment period
 - ▷ From the date on your Benefits Enrollment Summary
 - ▷ A one-time-only opportunity to enroll based on eligibility
- ▶ If you decline/terminate coverage, you cannot enroll in the future

p
a
t
h
w
a
y
s



Click: To Enroll Online


www.benefitsweb.com/countyoforange.html

24 hours a day, 7 days a week ▶ 30 days for the date on your New Hire package

▶ Go to the Benefits Center Web Site from any computer with Internet access, at home or at work

▶ Type the Web Site address into your Web browser and press “Enter” on your keyboard

pathways ▶ ▶ ▶ The County of Orange | Employee Benefits

 Pathways to Your Benefits

Welcome to the Site...

If you do not know your Personal Identification Number (PIN) and would like to request a PIN reminder, please enter your Social Security number and press the **"Request Your PIN"** button. A *PIN Reminder Letter* will be sent to your mailing address.

If you need assistance, you can call the County of Orange Benefits Resource Line at 1-866-325-2345 and follow the instructions to speak with a Benefits Specialist. Benefits Specialists are available Monday through Friday, 7:30 a.m. to 5:30 p.m., Pacific Time, except on holidays.

You may bookmark this page, or add it to your list of favorites. All other pages in this site are subject to change and should not be bookmarked or added to your list of favorites.

NOTE: Any unauthorized use or access to the pages, or the computer systems on which the pages and information to be displayed reside, is strictly prohibited and may be a criminal violation. Your use of this Web site is governed by and conditioned on your acceptance of the terms of use referenced herein (a link to read the Terms of Use is provided below) and such other terms and conditions as may be contained in this Web site. Your use of this Web site constitutes your agreement to the terms of use and all such additional terms and conditions.

Login

Please enter your Social Security Number and PIN to access your personal benefit information.

SSN:

PIN:

[Forgot Your PIN?](#)

Copyrighted © 2005 | [Terms of Use](#) [Privacy Policy](#) | [System Requirements](#)



Click: To Enroll Online

- ▶ After you save your changes, your Benefits Confirmation Statement will appear on your screen
 - ▷ Review your benefit elections for 2006
 - ▷ Print a copy for your records
- ▶ You will also receive a Benefits Confirmation Statement by mail within 7 to 10 days

p
a
t
h
w
a
y
s



Forgot Your PIN?

Pathways

Pathways

The County of Orange | Employee Benefits



Pathways to Your Benefits



Welcome to the Site...

If you do not know your Personal Identification Number (PIN) and would like to request a PIN reminder, please enter your Social Security number and press the **"Request Your PIN"** button. A *PIN Reminder Letter* will be sent to your mailing address.

If you need assistance, you can call the County of Orange Benefits Resource Line at 1-866-325-2345 and follow the instructions to speak with a Benefits Specialist. Benefits Specialists are available Monday through Friday, 7:30 a.m. to 5:30 p.m., Pacific Time, except on holidays.

You may bookmark this page, or add it to your list of favorites. All other pages in this site are subject to change and should not be bookmarked or added to your list of favorites.

NOTE: Any unauthorized use or access to the pages, or the computer systems on which the pages and information to be displayed reside, is strictly prohibited and may be a criminal violation. Your use of this Web site is governed by and conditioned on your acceptance of the terms of use referenced herein (a link to read the Terms of Use is provided below) and such other terms and conditions as may be contained in this Web site. Your use of this Web site constitutes your agreement to the terms of use and all such additional terms and conditions.

Login

Please enter your Social Security Number and PIN to access your personal benefit information.

SSN:

PIN:

Login



Clear

[Forgot Your PIN?](#)



Forgot Your PIN?

Pathways

p a t h w a y s		The County of Orange Employee Benefits	
			
Welcome to the Site...		Login	
<p>If you do not know your Personal Identification Number (PIN) and would like to request a PIN reminder, please enter your Social Security number and press the "Request Your PIN" button. A <i>PIN Reminder Letter</i> will be sent to your mailing address.</p> <p>If you need assistance, you can call the County of Orange Benefits Resource Line at 1-866-325-2345 and follow the instructions to speak with a Benefits Specialist. Benefits Specialists are available Monday through Friday, 7:30 a.m. to 5:30 p.m., Pacific Time, except on holidays.</p> <p>You may bookmark this page, or add it to your list of favorites. All other pages in this site are subject to change and should not be bookmarked or added to your list of favorites.</p> <p><small>NOTE: Any unauthorized use or access to the pages, or the computer systems on which the pages and information to be displayed reside, is strictly prohibited and may be a criminal violation. Your use of this Web site is governed by and conditioned on your acceptance of the terms of use referenced herein (a link to read the Terms of Use is provided below) and such other terms and conditions as may be contained in this Web site. Your use of this Web site constitutes your agreement to the terms of use and all such additional terms and conditions.</small></p>		<p>"Forgot Your PIN?" You must enter a Social Security Number (SSN) before making a choice below.</p> <p>Enter SSN <input type="text"/></p> <p>Answer Challenge Questions</p> <p>Mail a PIN Reminder</p> <p>Return to Login Page</p>	
Copyrighted © 2005 Terms of Use		Privacy Policy System Requirements	



More Information

p a t h w a y s ► ► ► [Home](#) | [FAQs](#) | [Documents & Forms](#) | [Contact Us](#) | [Inbox](#) | [Log Out](#) Search **GO**

Pathways to Your Benefits

The County of Orange | Employee Benefits

Personal Information | Health & Welfare | Work/Life Events

XXX-XX-6028 October 21, 2005

[Home](#) > [Personal Information](#)

Personal Data

Address Information

Covered Dependents

Login and Site Preferences

Communication Preferences



Learn More

[Manage your Health & Welfare benefits](#)

I want to ...

[Register now for 'Forgot Your PIN?' which allows access to this site in case you forget your PIN.](#)

[The County's Human Resources website](#)

Personal Data
Review your personal data currently on file.

Address Information
Access and manage your address information.

Covered Dependents
Review your approved covered dependents and the coverages in which they are currently enrolled.

Login and Site Preferences
Indicate your preferences for accessing and using this site, including changing your PIN and registering for the "Forgot Your PIN?" feature.

Communication Preferences
Register or update your e-mail communication preferences.

Copyright © 2005 | [Privacy Policy](#) [Terms of Use](#) [Home](#) | [FAQs](#) | [Documents & Forms](#) | [Contact Us](#) | [Inbox](#) | [Log Out](#)



More Information

pathways > > > [Home](#) | [FAQs](#) | [Documents & Forms](#) | [Contact Us](#) | [Inbox](#) | [Log Out](#) Search

Pathways to Your Benefits

The County of Orange | Employee Benefits

Personal Information **Health & Welfare** **Work/Life Events**

XXX-XX-6028 October 21, 2005


[Home](#) > [Health & Welfare](#)

Coverage Details

Change Coverage

Planning Tools

Resource Materials



Open Events Summary
[Open Enrollment](#)
Status: Incomplete
Event Date: Jan 1, 2006
Enrollment Deadline: Nov 28, 2005
(39 days remaining)

I want to ...
[Review Plan Guidelines](#)
[Compare available health plans](#)
[Download and print claim forms and other benefit forms](#)
[Find a plan administrator to determine if a provider is in my network](#)
[Find contact information for plan administrators and other groups](#)

Coverage Overview

Benefit	Your Current Choices	Effective Date	Your Bi-weekly Cost/(Credit)	
			Before-Tax	After-Tax
Health Plan	Premier Wellwise PPO , Yourself Only	01/01/2005	\$15.70	\$0.00
Health Care Reimbursement Account	No Coverage , \$0.00 Annual	01/01/2005		
Dependent Care Reimbursement Account	No Coverage , \$0.00 Annual	01/01/2005		
1% Retiree Medical Contribution Plan	Covered	01/01/2005		
Your Total Bi-weekly Cost/(Credit)			\$15.70	\$0.00

Learn More
[When can I make changes to current coverage?](#)
[What calculators and tools are available to me?](#)
[Need to speak with a Benefits Specialist?](#)

Understanding Your Health and Welfare Benefits

The Health and Welfare Benefits program provides you and your eligible dependents with a broad range of coverages.

During Open Enrollment, you will have the opportunity to make changes to your benefits for the upcoming plan year.



Work/Life Events

pathways ► ► ► [Home](#) | [FAQs](#) | [Documents & Forms](#) | [Contact Us](#) | [Inbox](#) | [Log Out](#) Search **GO**



Pathways to Your Benefits

The County of Orange | Employee Benefits


Personal Information | Health & Welfare | **Work/Life Events**

XXX-XX-6028 October 21, 2005

[Home](#) > [Work/Life Events](#)

[Report & Manage an Event](#)

[FAQs](#)



I want to ...

- [Review Plan Guidelines](#)
- [Download and print claims forms and other benefit forms](#)
- [Information about a health plan's services and costs, such as coinsurance and annual deductibles is available in the Health Plan Comparison Chart](#)
- [Make sure my address is up-to-date](#)

Understanding Work/Life Events

A qualifying work or life event may provide you the opportunity to make certain changes to your benefit elections.

Depending on the event, you may be eligible to change your benefit elections and you may also want to update or enroll in the 457 Deferred Compensation Plan and other savings plans. Life or work events may also be a good time to evaluate the beneficiary designations for your life and/or Accidental Death and Dismemberment insurance proceeds.

Decisions about your benefit plans require careful consideration.

You can use this site to:

- [Preview](#) changes before reporting a change.
- [Change your benefits](#)
- Find answers to [frequently asked questions](#)

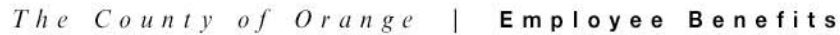
Open Events Summary

[Open Enrollment](#)
Status: Incomplete
Event Date: Jan 1, 2006
Enrollment Deadline: Nov 28, 2005
(39 days remaining)

Learn More

- [What is a qualifying life event?](#)
- [Dependents, who is eligible?](#)
- [What are the qualifications for a Domestic Partnership?](#)
- [What is the basis for a Domestic Partner Tax Status?](#)
- [How do I find out about my supplemental benefits such as life, disability and vision?](#)

Copyright © 2005 | [Privacy Policy](#) [Terms of Use](#) [Home](#) | [FAQs](#) | [Documents & Forms](#) | [Contact Us](#) | [Inbox](#) | [Log Out](#)



papers that have

2006 New Retiree Presentation



Healthcare Advisor™

p a t h w a y s ▶ ▶ ▶



Pathways to Your Benefits

The County of Orange | Employee Benefits

[Start](#) | [Health Topics](#) | [Hospitals](#) | [Tools & Resources](#) | [Exit](#)

Health Topics

Decision Guide - If you would like to learn how you can be guided through a decision process for a Health Topic, click [here](#).

Choose a Health Topic Area to view available Health Topics:

- Accidents and Injuries
- Adolescent Health
- Allergies and Asthma
- Bone, Joint and Muscle
- Brain and Nervous System
- Cancer
- Children's Health (Pediatrics)
- Diabetes
- Digestive/Gastroenterology
- Ear, Nose and Throat
- Endocrine, Nutritional and Metabolic
- Eye
- Geriatric (Senior) Health
- Gynecology (Female Reproductive System)
- Heart and Circulatory System
- Kidney and Urinary Tract
- Maternal and Childbirth
- Men's Health
- Respiratory, Pulmonary and Lung
- Skin/Dermatology
- Transplants

Search the Healthcare Advisor™

Search the Healthcare Advisor™ for a wealth of resources to help you make better health care decisions.

Hospitals

Find and Compare Hospitals
Search for hospitals in your area. Research their experience with specific Procedures or other Types of Care.

Tools & Resources

Questions to Ask Your Doctor
Be prepared to discuss your situation with your healthcare provider.

Questions to Ask Your Insurance Company
Get a list of questions to discuss with your benefits provider.

Medical Encyclopedia
Research articles from a large illustrated medical encyclopedia. Use the Search function or browse the Medical Encyclopedia.

Links and Resources
Links to other resources, including useful web sites, organized by Healthcare Topic.




Select-a-Plan Tool

pathways
a
y
s
h
w
a
t
h
p
a
t
h
w
a
y
s

pathways

Select-a-Plan

 Pathways to Your Benefits

The County of Orange | Employee Benefits

EXIT


Decision Center

Select-a-Plan is an Internet-based tool to help you make informed enrollment decisions based on personalized preferences about your health care benefits. Please select a tool below to get started.


This site features several tools to help you make a better health plan choice. Although Select-a-Plan can be helpful in assisting you in making a fully informed health plan decision, it is offered by the County of Orange only as one of many considerations in your decision-making process. Please refer to Section [Legal](#) for further information. Please click on the blue underlined title below to access the tool or tools you wish to use.

Site Features


Site Tools

Preference Module  [Use This Tool](#)

A three-step process that matches your personal preferences to your health plans.

Medical Cost Calculator  [Use This Tool](#)

An exercise that allows you to estimate your potential out-of-pocket costs for your health plans.

Comparison Module  [Use This Tool](#)

A side-by-side comparison of health plan details including cost, access, benefits, and service information.

[Glossary](#) | [Q&As](#) | [Help](#) | [Site Evaluation](#) | [Privacy](#) | [Legal](#) | [About Asparity](#)

POWERED BY
ASPARITY

©2005 Asparity Decision Solutions



Select-a-Plan Tool

pathways

Select-a-Plan

Pathways to Your Benefits

Decision Center » Preference Module

Preference Module

Modeled Coverage Level: **Yourself Only** **EXIT**

Overview | Select Coverage Level | **Select Attributes** | Importance of Difference | Tradeoffs | Results

Attribute Selection

Please check which of the following attributes (characteristics) are important to you when making a health plan choice. You may select as many as you would like (the more you select, the longer the exercise will take). There must be at least four (4) attributes checked for the tool to work.

Click on any attribute to see its definition.

☐ **Cost**

<input type="checkbox"/> Per pay period contribution	<input type="checkbox"/> Outpatient surgery <input type="checkbox"/> Initial outpatient surgery services cost <input type="checkbox"/> Outpatient surgery services coverage
<input type="checkbox"/> Annual deductible	<input type="checkbox"/> Your cost per doctor's office visit
<input type="checkbox"/> Annual out-of-pocket maximum on all expenses	<input type="checkbox"/> Your cost per specialist visit
<input type="checkbox"/> Inpatient hospitalization <input type="checkbox"/> Initial inpatient hospitalization treatment cost <input type="checkbox"/> Inpatient hospital services coverage	<input type="checkbox"/> Retail prescription drugs <input type="checkbox"/> Your cost per retail brand name prescription <input type="checkbox"/> Your cost per retail generic prescription
<input type="checkbox"/> Your cost per emergency room visit	

☐ **Access**

<input type="checkbox"/> Covered benefits are available outside the plan's provider network	<input type="checkbox"/> PCP selection required in advance of receiving care
<input type="checkbox"/> Ability to self-refer to a specialist	

☐ **Covered Benefits**

<input type="checkbox"/> Routine physical checkups	<input type="checkbox"/> Coverage of alternative therapies
<input type="checkbox"/> Vision care coverage by the health plan	




Select-a-Plan Tool

pathways

pathways

Select-a-Plan

 Pathways to Your Benefits

The County of Orange | Employee Benefits

Decision Center » Medical Cost Calculator

Modeled Coverage Level: Yourself Only

EXIT

Medical Cost Calculator

Overview | Select Coverage Level | Estimate Usage | Results

Estimate Use

Select the number of times you expect to incur charges for each of the items below during the plan year. Complete this process for yourself and each of your dependents.

To change the number of dependents, click on the tab at the top of the estimation table.

Individual to Estimate:
Self

Type of Medical Service	Estimated Cost	Estimate Use: Self	Subtotal Cost of Services Self	All Individuals
Routine Services				
Office visit for established patient	<input checked="" type="checkbox"/> \$ 66	0	\$0	\$0
Specialist visit	<input checked="" type="checkbox"/> \$ 96	0	\$0	\$0
X-ray	<input checked="" type="checkbox"/> \$ 67	0	\$0	\$0
Lab	<input checked="" type="checkbox"/> \$ 45	0	\$0	\$0
Preventive Services				
Routine physical exam	<input checked="" type="checkbox"/> \$ 133	0	\$0	\$0
Non-Routine Services				
Emergency room visit	<input checked="" type="checkbox"/> \$ 93	0	\$0	\$0
Inpatient hospitalization	<input checked="" type="checkbox"/> \$ 17651	0	\$0	\$0
Outpatient surgery	<input checked="" type="checkbox"/> \$ 2224	0	\$0	\$0
Prescription Drugs				
Retail prescription drug (brand, 30 day)	<input checked="" type="checkbox"/> \$ 65	0	\$0	\$0
Retail prescription drug (generic, 30 day)	<input checked="" type="checkbox"/> \$ 20	0	\$0	\$0
<div>Add / Remove Medical Services</div> <div>Reset to Defaults</div> <div>Reset to Zero</div>				
Estimated Total Cost for Services			\$0	\$0




Select-a-Plan Tool

pathways
a
t
h
w
a
y
s

pathways


Select-a-Plan

 Pathways to Your Benefits

Decision Center » Comparison Module

The County of Orange | Employee Benefits

Modeled Coverage Level: Yourself Only

 EXIT

Comparison Module

Overview | Select Coverage Level | **Select Plans** | Select Attributes | Results

Select health plans for Comparison

To look at plan details for a single health plan, simply click on "View Details" below the plan's name. In addition, you may compare the plans' details side-by-side by selecting the check box next to each plan and then pressing the "Next" button.

<input type="checkbox"/> CIGNA Private Practice HMO Select View Details Web Site Phone: 800-244-6224	Preference Score not yet determined Calculator Out-of-Pocket Cost not yet determined
<input type="checkbox"/> Kaiser Permanente HMO Select View Details Web Site Phone: 800-464-4000	Preference Score not yet determined Calculator Out-of-Pocket Cost not yet determined
<input type="checkbox"/> Premier Sharewell PPO Select View Details Web Site Phone: 800-908-9185	Preference Score not yet determined Calculator Out-of-Pocket Cost not yet determined
<input type="checkbox"/> Premier Wellwise PPO Select View Details Web Site Phone: 800-908-9185	Preference Score not yet determined Calculator Out-of-Pocket Cost not yet determined



Call: To Enroll by Phone

- ▶ Weekdays, 7:30 a.m. to 5:30 p.m. ▶ 30 days from the date of your Intent to Retire package
- ▶ Use a touch-tone phone to access the Benefits Resource Line
 - ▷ You'll be prompted to enter your Social Security number and PIN
 - If you do not have your PIN, press * * 0 to reach a Benefits Specialist
 - ▷ From the Benefits Selection Menu, you'll hear a list of options



Dial 1-866-325-2345, toll-free



Call: 1-866-325-2345 for Information

▶
▶
▶
▶
▶
p
a
t
h
w
a
y
s



- ▶ Use the automated phone system any time 24 hours a day, 7 days a week to
 - ▷ Review your elections
 - ▷ Change your PIN
 - ▷ Request forms
- ▶ Ask a Benefits Specialist for help (weekdays, 7:30 a.m. to 5:30 p.m., PST) if
 - ▷ You need to add or change dependent coverage
 - ▷ You have questions about your benefits or enrollment



Retiree Medical Insurance Program (RMIP) Grant

- ▶ Provisions and amounts
- ▶ 2006 net health plan premium examples

p
a
t
h
w
a
y
s



Monthly RMIP Grant

- ▶ For County health plan premiums
- ▶ For retiree and spouse Medicare premiums
- ▶ Medicare reimbursement only option
- ▶ Tax-free benefit, therefore cannot exceed health plan and Medicare premiums

p
a
t
h
w
a
y
s



Monthly RMIP Grant Amount

- ▶ 2006 grant = \$15.99 per year of County service
- ▶ Maximum monthly grant = \$399.75 for 25 years of service
- ▶ Increases by the average increase of all health plan premiums
- ▶ Maximum annual grant increase/decrease: 5%

p
a
t
h
w
a
y
s



RMIP Grant for Married Couples

- ▶ County retiree married to County retiree
 - ▷ Same health plan — combined grant
- ▶ County retiree married to County employee
 - ▷ If covered as spouse's dependent, grant suspended until your coverage as a dependent ends



RMIP Grant and Survivors

- ▶ Benefits for survivors of covered retirees
 - ▷ Continued coverage for dependents on retiree's health plan at the time of death
 - ▷ Survivor's grant equal to 50% of retiree's grant
 - ▷ Must receive an OCERS pension check



Net Health Plan Premium

- ▶ Full health plan premium less grant amount determine your monthly net premium cost
- ▶ Premium rates and grants change every calendar year

p
a
t
h
w
a
y
s



2006 Net Health Plan Premium

▶ Example 1:

- ▷ 25 years of County service
- ▷ Age 65 or older
- ▷ Enrolled in CIGNA HMO Plan
- ▷ Retiree with spouse, both enrolled in Medicare A & B
- ▷ Retiree Medical Grant = **\$399.75** per month



2006 Net Health Plan Premium

Example 1: Medicare-eligible retiree & spouse

- ▶ \$419.10 CIGNA HMO Plan premium
- ▶ \$177.00 Medicare premium paid by retiree directly to Social Security ($\$88.50 \times 2$)
- ▶ \$596.10 Subtotal
- ▶ (\$399.75) Grant reimbursement for health premium
- ▶ **\$196.35 Total net retiree cost per month**



2006 Net Health Plan Premium

▶ Example 2:

- ▷ 25 years of County service
- ▷ Under age 65
- ▷ Enrolled in CIGNA HMO Health Plan
- ▷ Retiree only
- ▷ No Medicare
- ▷ Retiree Medical Grant = **\$399.75** per month.



2006 Net Health Plan Premium

Example 2: Single retiree under age 65

- ▶ \$316.48 CIGNA Private Practice Plan premium
- ▶ (\$316.48) Grant reimbursement for health premium
- ▶ **\$0** **Total net retiree cost per month**



Retirees and Medicare

- ▶ Enrollment requirements
- ▶ Coordination of benefits

p
a
t
h
w
a
y
s



Retirees and Medicare

- ▶ Medicare enrollment **required** for retirees and covered spouses age 65 and older
 - ▷ Medicare A: Required if you are eligible for it at no cost
 - ▷ Medicare B: Required
- ▶ **Exception:** Medicare enrollment not required if you are employed and covered by your employer's health plan (unless you elect Kaiser)
- ▶ Enroll in Medicare
 - ▷ 90 days prior to retirement (if already age 65), or
 - ▷ 90 days prior to 65th birthday
 - ▷ Provide Medicare documentation to Benefits Center
- ▶ If you don't...
 - ▷ Medical grant suspended
 - ▷ You pay higher premiums until proof of Medicare enrollment is received by the Benefits Center



Medicare and PPO Plans

- ▶ Medicare is primary
 - ▷ Claims must be submitted to Medicare first
- ▶ PPO Plan is secondary
 - ▷ Send Medicare “Explanation of Benefits” and itemized bill to PPO Claims Administrator

p
a
t
h
w
a
y
s



Medicare and HMO Plans

CIGNA HMO

- ▶ Medicare is primary
- ▶ Provide CIGNA and Medicare cards to all providers

Kaiser Senior Advantage

- ▶ Requires Medicare enrollment
- ▶ Requires you to assign your Medicare benefits to Kaiser

p
a
t
h
w
a
y
s



Medicare and Kaiser

- ▶ A Kaiser Permanente Senior Advantage Enrollment form is included with your first benefits confirmation statement
- ▶ If you need an additional KPSA enrollment form, contact Benefits Resource Line
- ▶ If you want Kaiser coverage, complete the form and return it to the address on the form
- ▶ Kaiser will inform you of approval or denial

▶
▶
▶
▶
▶
y
a
w
h
t
a
p



Resources

- ▶ For help and more information both now and after you retire

p
a
t
h
w
a
y
s



County of Orange Benefits Center

- ▶ www.benefitsweb.com/countyoforange.html
- ▶ Benefits Resource Line: 1-866-325-2345
- ▶ FAX: 1-973-837-3330
- ▶ Mailing address:
PO Box 436
Little Falls, NJ 07424



Benefits Billing Services

▶ www.ceridian-benefits.com

▶ Phone: 1-877-588-0946

▶ Mailing address:

3201 34th Street South
Petersburg, FL 33711

p
a
t
h
w
a
y
s



PPO Plans

- ▶ PacifiCare Health Plan Administrators
 - ▷ Benefits, preferred providers, hospital information
 - ▷ www.pacificare.com/ocppo
 - ▷ Phone: 1-800-908-9185
- ▶ Walgreens (WHI)
 - ▷ Prescription drug information
 - ▷ www.mywhi.com
 - ▷ Phone: 1-800-573-3583



HMO Plans

▶ CIGNA

- ▷ www.cigna.com/countyoforange
- ▷ Customer service: 1-800-244-6224

▶ Kaiser

- ▷ www.kaiserpermanente.org
- ▷ Customer service: 1-800-464-4000

▶ VSP

- ▷ Vision plan
- ▷ www.vsp.com
- ▷ Phone: 1-800-877-7195

▶ ASHP

- ▷ Chiropractic
- ▷ www.ashcompanies.com
- ▷ Phone: 1-800-678-9133



Employee Benefits Web Site

www.oc.ca.gov/hr/employeebenefits

- ▶ For general information about your County of Orange benefits

p
a
t
h
w
a
y
s



The County of Orange | **Employee Benefits**

Summary

Enrollment Process

▶
▶
▶
▶
▶
p a t h w a y s





Enrollment Process

- ▶ **Step 1:** Meet with OCERS at least 60 days before your last day at work
- ▶ **Step 2:** Elect your retiree health plan coverage within 30 days from the date on your Benefits Enrollment Summary
- ▶ **Step 3:** Review your *two* confirmation statements and report any errors within 10 business days
- ▶ **Step 4:** Pay your share of the premiums (if applicable)

▶
▶
▶
▶
▶
y
s
a
y
w
h
a
t
p



The County of Orange | **Employee Benefits**

Any Questions?

ways that pay

